Introduction

Hôpital Montfort’s Family Birthing Centre (FBC) values compassion, best practices and family-centred safety. Accordingly, Montfort has instituted a service model unique in the Ottawa region, allowing you and your family to experience the birth of your child in a luxurious room where your comfort and peace of mind are assured. We are committed to providing attentive, state-of-the-art services in relaxed and inviting surroundings.

Hôpital Montfort’s birth plan explains the various options available to you during labour and delivery. The companion guide will help you make informed decisions for an even more memorable birth experience.

It is important to remember that although your healthcare team will make every effort to respect your wishes, unforeseen complications or changes could alter the original plan. In such cases, you will be informed and included in the decision-making process. Also bear in mind that your birth plan is not a contract and you are free to change your mind at any time.

www.infosbebes.com
What Hôpital Montfort has to offer you...

The Family Birthing Centre (FBC) healthcare team includes nurses, doctors, midwives and various other health professionals and support staff. Hôpital Montfort is proud of being a teaching hospital, and your birthing team will therefore include students and medical residents.

*We look forward to having you with us and working with you to make your baby’s birth a positive and memorable experience!*

In keeping with best practices, the FBC care team assures you that the following guidelines will apply during your stay at Hôpital Montfort:

- The health of mothers and newborns is our top priority. Fathers and significant others are important members of the team and are encouraged to actively participate in the birthing process and post-natal period.
- The healthcare team’s approach is non-interventionist (no intervention occurs without a medical reason).
- Any intervention is discussed with you in advance and you are involved in the decision-making.
- When possible, you and your baby will have skin-to-skin contact immediately after the birth (uninterrupted contact for at least one hour or for as long as you like). Routine newborn care, such as weighing, measuring, vitamin K injections and erythromycin ointment application are delayed to allow for this precious time.
- If your baby is born by cesarean section and if you and your baby are both well enough, the healthcare team will assist you with skin-to-skin contact in the operating room and recovery room. If medical reasons prevent this possibility, skin-to-skin contact can be provided by your partner or other support person in the recovery room or in your hospital room.
- You and your baby will stay together in the same room at all times unless any medical complications arise.

The Family Birthing Centre’s breastfeeding policy also includes the following:

- Breastfeeding will begin as soon after birth as possible.
- Your healthcare team will instruct and support you to initiate and maintain breastfeeding.
- If medical reasons require that your baby receive a supplement (expressed breast milk or formula), you can choose from a number of methods for delivering it: cup, spoon, syringe, finger feeding or lactation aids, etc.).

*If you have questions or comments,*

*please feel free to discuss them with your nurse, doctor or midwife.*
MY BIRTH PLAN

My name:_______________________________________________________________

Name of my partner / significant other: ______________________________________

I am expecting: □ a boy □ a girl □ a surprise???

Baby’s name (if you have already decided): ____________________________________

I would like the following people to be present:

<table>
<thead>
<tr>
<th>Name and relationship*</th>
<th>During labour</th>
<th>During the birth</th>
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*NOTE: Your partner or other support person is encouraged to stay with you during the entire birthing process. No more than two additional support persons may be present during your labour and the birth if your clinical condition permits.

My pain management preferences:

____ I want a medication-free delivery.
____ I want a medication-free delivery if my labour goes well.
____ I have no preferences regarding the use of medication.
____ I want medication, but I would like to go as long as possible without it.
____ I want medication as soon as possible.

Other pain management options: (you may check more than one box)

□ Birthing ball □ Massage □ Pressure points
□ Shower □ Hot compresses □ Counter pressure
□ Bath (with or without jets) □ Cold compresses □ Focussing
□ Walking and different positions □ Relaxation techniques □ Visualization
□ Breathing techniques □ Cold compresses □ Listening to my own music

Other: _______________________________________________________________

Pain management medication options: (you may check more than one box)

□ Narcotics
□ Nitronox (gas)
□ Epidural
My baby’s birth:

During the pushing stage:
☐ I would like healthcare staff to support me in my preferred positions.
☐ I would like different positions to be suggested to me.
☐ I would like to have a mirror so that I can watch my progress as I push.
☐ I would like to touch the baby’s head when it crowns.

In the case of a cesarean birth:
☐ I would like __________________________ to be with me in the operating room and recovery room.

Feeding my baby:
I want to:   ☐ Breastfeed
            ☐ Bottle feed (commercial formula)
            ☐ Mixed feed (breastfeeding + commercial formula)*
* Mixed feeding (breastfeeding + bottle feeding) is not recommended during hospitalization or in the early weeks after birth except for medical reasons. Studies show that this type of feeding can affect breast milk production and your chances of successful breastfeeding.

Your past experience:
☐ I have never breastfed
☐ I have breastfed ____ child(ren):   #1 for ____ weeks / ____ months
                      #2 for ____ weeks / ____ months
                      #3 for ____ weeks / ____ months

My comments/questions/concerns about feeding my baby:
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
Other general questions...

I would like my healthcare team to be aware of the following concerns/worries:

_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

I have special needs:

_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

I have questions, or I need additional information about:

_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

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